## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

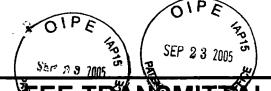
ndicated unless corrected t naintenance fee notification	pelow or directed otherwise is.	in Block I, by (a)	specifying a new c	orrespondence address;	and/or (b) indicating a sepa	arate "FEE ADDRESS" for
	E ADDRESS (Note: Use Block 1 for 90 06/28/2005	any change of address)	IPE	Note: A certificate of Fee(s) Transmittal. Th papers. Each additions have its own certificate	mailing can only be used for is certificate cannot be used if paper, such as an assignment of mailing or transmission.	or domestic mailings of the for any other accompanying ent or formal drawing, must
STATTLER JOH P.O. BOX 51860 PALO ALTO, CA- FENWICK & WE		SEP	2 3 2005 5	Cer I hereby certify that the States Postal Service vaddressed to the Mai transmitted to the USP	rtificate of Mailing or Trans is Fee(s) Transmittal is bein with sufficient postage for fir I Stop ISSUE FEE address TO (703) 746-4000, on the c	smission g deposited with the United st class mail in an envelope above, or being facsimile tate indicated below.
CUSTOMER NUM	BER 00758	(Ze)	40E)	Rajiv P.	Pate1	(Depositor's name)
801 CALIFORN	IA STREET	& TRAD	EMARIN	Villa	DI .	(Signature)
MOUNTAIN VIE	W, CA 94041			Septembe	r 20, 2005	(Date)
APPLICATION NO.	FILING DATE	FI	RST NAMED INVE	/TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/977,871	10/14/2001	J	leffrey Charles Haw	kins	HAND.P0013	4375
TITLE OF INVENTION: M	ETHOD AND APPARATU	S FOR ACCESSIN	G A CONTACTS I	ATABASE AND TEL	EPHONE SERVICES	
					•	
APPLN. TYPE	SMALL ENTITY	ISSUE FEI	E P	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	•	\$0	\$1400	09/28/2005
EXAM	INER	ART UNIT	г с	LASS-SUBCLASS	]	
BAYERL, R	AYMOND J	2173		715-780000	•	
CFR 1.363). Previou Change of correspond Address form PTO/SB/1: "Fee Address" indica	e address or indication of "F S POA filed (C Jence address (or Change of 22) attached. tion (or "Fee Address" Indic or more recent) attached. Us	copy enc1. Correspondence	(1) the names of or agents OR, alte (2) the name of a	single firm (having as y or agent) and the nan t attorneys or agents. If	nt attorneys 1 Fellw.	ick & West LLP
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON TH	HE PATENT (print	or type)		
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee do of this form is NOT	ata will appear on a substitute for filir	the patent. If an assign ag an assignment.	nee is identified below, the	document has been filed for
(A) NAME OF ASSIGN			•	TY and STATE OR CO		
Palm, Inc			Sunnyval			
Please check the appropriate	assignee category or catego	ories (will not be prin	nted on the patent):	Individual 🛛 C	orporation or other private gr	roup entity Government
4a. The following fee(s) are	enclosed:		Payment of Fee(s):			
Issue Fee			_	mount of the fee(s) is en		
	small entity discount permitte		_	lit card. Form PTO-203		
Advance Order - # of	f Copies	<del></del> . ;	The Director is Deposit Account No	hereby authorized by comber $19-2555$	charge the required fee(s), or (enclose an extra	r credit any overpayment, to copy of this form).
	(from status indicated above MALL ENTITY status. See		□ h Annlicent is n	o longer claiming SMA	LL ENTITY status. See 37 (	CEP 1 27(a)(2)
					ly paid issue fee to the applic sistered attorney or agent; or	
Authorized Signature	Vin Plat				ptember 20, 20	
Typed or printed name _	Rajiv P. Pate	1		Registration	1 No. 39-, 327	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PTOL-85 (Rev. 12/04) Approved for use through 04/30/2007.

OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE



## FEE TRANSMITTAL FOR FY 2005

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,480.00

Complete if Known					
Application Number	09/977,871				
Filing Date	October 14, 2001				
First Named Inventor	Jeffrey Charles Hawkins				
Examiner Name	Raymond J. Bayeri				
Art Unit	2173				
Attorney Docket No.	24772-10593				

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)					
Check Credit Card Deposit Account:	☐ Money Order ☐ Other ☐ None	3. AD	DITION	AL FEE	s		
Deposit Account Number	19-2555	Large I	Entity	Small	Entity	Fee Description	Fee Paid
Deposit Account Name	Fenwick & West LLP	Fee	Fee	Fee	Fee		
Charge fee(s) indicated	prized to: (check all that apply) below Credit any overpayments s) or any underpayment of fee(s) due	1051 1052 1053	(\$) 130 50 130	2051 2052 1053	( <b>\$)</b> 65 25 130	Surcharge - late filing fee or oath or declaration Surcharge - late provisional filing fee or cover sheet Non-English specification	
under 37 CFR §1.16 or	§1.17 during the pendency of this	1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
application  Charge fee(s) indicated the above-identified dep	below, except for the filing fee to osit account.	1804 1805	920* 1,840*	1804 1805	920* 1,840*	Requesting publication of SIR prior to Examiner action Requesting publication of SIR after Examiner action	
FEE CA	ALCULATION	1251	120	2251	60	Extension for reply within first month	
BASIC FILING FEE     Large Entity Small Entity		1252 1253	450 1020	2252 2253	225 510	Extension for reply within second month  Extension for reply within third month	
Fee Fee Fee Fee Code (\$)	Fee Description Fee Paid	1254 1255 1401	1,590 2,160 500	2254 2255 2401	795 1,080 250	Extension for reply within fourth month  Extension for reply within fifth month  Notice of Appeal	
		1402	500 1000	2402	250 500	Filing a brief in support of an appeal Request for oral hearing	
		1451	1,510	1451	1,510	Petition to institute a public use proceeding	
		1452	500	2452	250	Petition to revive - unavoidable	
SUBTO	TAL (1) (\$) 0.00	1453	1,500	2453	750	Petition to revive - unintentional	
2. EXTRA CLAIM FEES	FOR UTILITY AND REISSUE	1501	1,400	2501	700	Utility issue fee (or reissue)	1400
Ext	ra Claims Fee from Fee Paid	1502	800	2502	400	Design issue fee	
Total Claims -20**=	x =	1503	1100	2503	550	Plant issue fee	
Independent Claims	x =	1460	_	1460		Petitions to the Director	
Multiple Dependent	=	1807	50	1807	50	Processing fee for Provisional Applications	
Large Entity Small Entity		1806	180	1806	180	Submission of Information Disclosure Stmt	
Fee Fee Fee Code (\$)	Fee Description	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	80.
1202 50 2202 25	Claims in excess of 20	1809	790	2809	395	Filing a submission after final rejection (37 CFR 1.129(a))	
1201 200 2201 100	Independent claims in excess of 3	1810	790	2810	395	For each additional invention to be examined (37 CFR 1.129(b))	
1203 360 2203 180	Multiple dependent claim, if not paid	1801	790	2801	395	Request for Continued Examination (RCE)	
1204 200 2204 100	**Reissue independent claims over original patent	1802	900	1802	900	Request for expedited examination of a design application	
1205 50 2205 25	**Reissue claims in excess of 20 and over original patent	Other	fee (specif	ý)			
SUBTO	TAL (2) (\$) 0.00					SUBTOTAL (3) (\$) 1,48	0.00
or number previously paid, if	greater; For Reissues, see above	•Reduc	ed by Basi	c Filing F	ee Paid		

SUBMITTED BY				Complete (if applicable)
Name (Print/Type)	Rajiv P. Patel	Registration No. (Attorney/Agent) 39,327		Telephone (650) 335-7607
Signature	Pay Plate		Date	September 20, 2005